

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

MOVE MARYLAND FORWARD

ADDRESS (number and street)

PO BOX 162

Check if different
than previously
reported. (ACC)

ANNAPOLIS

MD

21404

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00622431

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☒ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of

MD

5. Covering Period

M M / D D / Y Y Y Y Y Y
10 20 2016

through

M M / D D / Y Y Y Y Y Y
11 28 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

KENNEY, J M, , ,

Type or Print Name of Treasurer

Signature of Treasurer

KENNEY, J M, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
11 29 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

MOVE MARYLAND FORWARD

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 / 20 / 2016 To: M M / D D / Y Y Y Y Y Y
11 / 28 / 2016

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016 | | 0.00 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 128228.69 | |
| (c) Total Receipts (from Line 19) | 72440.00 | 350040.69 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 200668.69 | 350040.69 |
| 7. Total Disbursements (from Line 31)..... | 200485.31 | 349857.31 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 183.38 | 183.38 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

MOVE MARYLAND FORWARD

Report Covering the Period:

From:

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10 | | 20 | | 2016 |

To:

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11 | | 28 | | 2016 |

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

72440.00

349940.00

(ii) Unitemized

0.00

0.69

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

72440.00

349940.69

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

72440.00

349940.69

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

100.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))

72440.00

350040.69

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

72440.00

350040.69

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 7563.44 | 30913.44 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 7563.44 | 30913.44 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditures (use Schedule E) | 192921.87 | 318843.87 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 100.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 0.00 | 0.00 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 200485.31 | 349857.31 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 200485.31 | 349857.31 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 72440.00 | 349940.69 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 72440.00 | 349940.69 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ | 7563.44 | 30913.44 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36)▶ | 7563.44 | 30913.44 |

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 13

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MOVE MARYLAND FORWARD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BEN FREDERICK REALTY INC

Mailing Address PO BOX 16312

City
BALTIMORE

State
MD

Zip Code
21210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 25 / 2016

Transaction ID : SA11AI.4206

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAVCO RESTAURANTS INC

Mailing Address 1637 CROFTON BLVD

City
CROFTON

State
MD

Zip Code
21114

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 01 / 2016

Transaction ID : SA11AI.4209

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HEIST PROPERTY LLC

Mailing Address PO BOX 703

City
OWINGS MILL

State
MD

Zip Code
21117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

166440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 25 / 2016

Transaction ID : SA11AI.4208

Amount of Each Receipt this Period

66440.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

72440.00

TOTAL This Period (last page this line number only)..... ►

72440.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 13

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MOVE MARYLAND FORWARD

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address THREE WORLD FINANCIAL CENTER

City
NEW YORKState
NYZip Code
10281Purpose of Disbursement
FEDEX CHARGES

001

Candidate Name

MOVE MARYLAND FORWARD

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 0 | | | 2 | 1 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C C00622431

Transaction ID : SB21B.4220

Amount of Each Disbursement this Period

303.03

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MACKENZIE & COMPANYMailing Address 2776 S ARLINGTON MILL DRIVE
NUM 806City
ARLINGTONState
VAZip Code
22206Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Candidate Name

MOVE MARYLAND FORWARD

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 1 | | | 0 | 1 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C C00622431

Transaction ID : SB21B.4223

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRATEGIC CAMPAIGN GROUPMailing Address 191 MAIN STREET
SUITE 310City
ANNAPOLISState
MDZip Code
21401Purpose of Disbursement
CONSULTING - MANAGEMENT

001

Candidate Name

MOVE MARYLAND FORWARD

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 0 | | | 2 | 8 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C C00622431

Transaction ID : SB21B.4224

Amount of Each Disbursement this Period

4750.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

7553.03

TOTAL This Period (last page this line number only)..... ►

7553.03

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 8 OF 13
 FOR LINE 24 OF FORM 3X

| | | | | | |
|---|-------------|---|--|--|--|
| NAME OF COMMITTEE (In Full) MOVE MARYLAND FORWARD | | | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00622431 </div> | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report | | | | New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> | |
| Full Name of Payee <input type="checkbox"/> Memo Item ATLANTIC LIST COMPANY | | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">11 / 02 / 2016</div> | | |
| Mailing Address 2300 - 9TH STREET SOUTH SUITE 301 | | | Amount <div style="border: 1px solid black; padding: 2px;">6400.00</div> | | |
| City ARLINGTON | State VA | Zip Code 22204 | Transaction ID : SE.4200 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">11 / 01 / 2016</div> | | |
| Purpose of Expenditure DATA TARGETING FOR GOTV CALLS | | Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div> | Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose SZELIGA, KATHY, , , | | |
| Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">277643.87</div> | | Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MD Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ | | | |
| Full Name of Payee <input type="checkbox"/> Memo Item CAMPAIGN COMMUNICATIONS INC | | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 25 / 2016</div> | | |
| Mailing Address 3 CHURCH CIRCLE SUITE 245 | | | Amount <div style="border: 1px solid black; padding: 2px;">26500.00</div> | | |
| City ANNAPOLIS | State MD | Zip Code 21401 | Transaction ID : SE.4175 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 21 / 2016</div> | | |
| Purpose of Expenditure GOTV CALLS | | Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div> | Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose SZELIGA, KATHY, , , | | |
| Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">223814.00</div> | | Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MD Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ | | | |
| (a) SUBTOTAL of Itemized Independent Expenditures | | | <div style="border: 1px solid black; padding: 2px;">32900.00</div> | | |
| (a) SUBTOTAL of Unitemized Independent Expenditures | | | <div style="border: 1px solid black; padding: 2px;"></div> | | |
| (a) TOTAL Independent Expenditures | | | <div style="border: 1px solid black; padding: 2px;"></div> | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | | |
| KENNEY, J M, , , Signature | | [Electronically Filed] | | Date <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">11 / 29 / 2016</div> | |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 9 OF 13
 FOR LINE 24 OF FORM 3X

| | | | | | |
|---|-------------|------------------------|--|---|--|
| NAME OF COMMITTEE (In Full) MOVE MARYLAND FORWARD | | | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00622431 </div> | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on | | | | <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> | |
| Full Name of Payee <input type="checkbox"/> Memo Item CAMPAIGN COMMUNICATIONS INC | | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> | | |
| Mailing Address 3 CHURCH CIRCLE SUITE 245 | | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">41200.00</div> | | |
| City ANNAPOLIS | State MD | Zip Code 21401 | Transaction ID : SE.4204 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> | | |
| Purpose of Expenditure GOTV CALLS (11/04 - 11/08) | | Category/ Type 004 | <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> | | |
| Name of Federal Candidate: SZELIGA, KATHY, , , | | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: MD | | |
| Calendar Year-To-Date Per Election for Office Sought | | | <div style="border: 1px solid black; padding: 2px; display: inline-block;">318843.87</div> | | |
| Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ | | | | | |
| Full Name of Payee <input type="checkbox"/> Memo Item GLOBAL ALLIANCE COMMUNICATIONS INC | | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> | | |
| Mailing Address 3907 N FEDERAL HWY #252 | | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">65000.00</div> | | |
| City POMPANO BEACH | State FL | Zip Code 33064 | Transaction ID : SE.4168 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> | | |
| Purpose of Expenditure TELEPHONE BANKS | | Category/ Type 004 | <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> | | |
| Name of Federal Candidate: SZELIGA, KATHY, , , | | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: MD | | |
| Calendar Year-To-Date Per Election for Office Sought | | | <div style="border: 1px solid black; padding: 2px; display: inline-block;">190922.00</div> | | |
| Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ | | | | | |
| (a) SUBTOTAL of Itemized Independent Expenditures | | | <div style="border: 1px solid black; padding: 2px; display: inline-block;">106200.00</div> | | |
| (a) SUBTOTAL of Unitemized Independent Expenditures | | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> | | |
| (a) TOTAL Independent Expenditures | | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | | |
| Signature KENNEY, J M, , , | | [Electronically Filed] | | Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> | |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 10 OF 13
 FOR LINE 24 OF FORM 3X

| | | | | | |
|---|--|--------------------|---|---|---|
| NAME OF COMMITTEE (In Full) MOVE MARYLAND FORWARD | | | | FEC IDENTIFICATION NUMBER ▼ C C00622431 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on | | | | <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div> | |
| Full Name of Payee GLOBAL ALLIANCE COMMUNICATIONS INC | | | <input type="checkbox"/> Memo Item | | Date of Public Distribution/Dissemination |
| Mailing Address 3907 N FEDERAL HWY #252 | | | | | <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div> |
| City POMPANO BEACH | | State FL | Zip Code 33064 | | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">10000.00</div> |
| Purpose of Expenditure GOTV TELEPHONE BANKS | | | Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div> | | Transaction ID : SE.4196 Date of Disbursement or Obligation |
| Name of Federal Candidate: SZELIGA, KATHY, , , | | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶ |
| Calendar Year-To-Date Per Election for Office Sought | | | <div style="border: 1px solid black; padding: 2px; text-align: right;">252693.87</div> | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ |
| Full Name of Payee GLOBAL ALLIANCE COMMUNICATIONS INC | | | <input type="checkbox"/> Memo Item | | Date of Public Distribution/Dissemination |
| Mailing Address 3907 N FEDERAL HWY #252 | | | | | <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div> |
| City POMPANO BEACH | | State FL | Zip Code 33064 | | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">18550.00</div> |
| Purpose of Expenditure GOTV TELEPHONE BANKS | | | Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div> | | Transaction ID : SE.4199 Date of Disbursement or Obligation |
| Name of Federal Candidate: SZELIGA, KATHY, , , | | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶ |
| Calendar Year-To-Date Per Election for Office Sought | | | <div style="border: 1px solid black; padding: 2px; text-align: right;">271243.87</div> | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ |
| (a) SUBTOTAL of Itemized Independent Expenditures | | | | | <div style="border: 1px solid black; padding: 2px; text-align: right;">28550.00</div> |
| (a) SUBTOTAL of Unitemized Independent Expenditures | | | | | <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> |
| (a) TOTAL Independent Expenditures | | | | | <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | | |
| Signature KENNEY, J M, , , | | | [Electronically Filed] | | Date |
| | | | | | <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div> |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 11 OF 13
 FOR LINE 24 OF FORM 3X

| | | | | | |
|--|--|--|--|---|--|
| NAME OF COMMITTEE (In Full) MOVE MARYLAND FORWARD | | | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00622431 </div> | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report | | | | New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/> | |

| | | | | | |
|--|--------------------|---|--|--|--|
| Full Name of Payee <input type="checkbox"/> Memo Item HEARST RADIO | | | Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> | | |
| Mailing Address 3800 HOOPER AVE | | | <input type="text"/> / <input type="text"/> / <input type="text"/> | | |
| City BALTIMORE | State MD | Zip Code 21211 | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">6392.00</div> | | |
| Purpose of Expenditure RADIO ADS (10/23 - 10/30/2016) | | Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div> | Transaction ID : SE.4172 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> | | |
| Name of Federal Candidate: SZELIGA, KATHY, , , | | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____ | | |
| Calendar Year-To-Date Per Election for Office Sought | | | <div style="border: 1px solid black; padding: 2px; display: inline-block;">197314.00</div> | | |

| | | | | | |
|--|--------------------|---|--|--|--|
| Full Name of Payee <input type="checkbox"/> Memo Item HEARST RADIO | | | Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> | | |
| Mailing Address 3800 HOOPER AVE | | | <input type="text"/> / <input type="text"/> / <input type="text"/> | | |
| City BALTIMORE | State MD | Zip Code 21211 | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5240.00</div> | | |
| Purpose of Expenditure RADIO ADS (10/31 - 11/06/2016) | | Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div> | Transaction ID : SE.4219 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> | | |
| Name of Federal Candidate: SZELIGA, KATHY, , , | | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____ | | |
| Calendar Year-To-Date Per Election for Office Sought | | | <div style="border: 1px solid black; padding: 2px; display: inline-block;">242693.87</div> | | |

| | |
|---|---|
| (a) SUBTOTAL of Itemized Independent Expenditures | <div style="border: 1px solid black; padding: 2px; display: inline-block;">11632.00</div> |
| (a) SUBTOTAL of Unitemized Independent Expenditures | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> |
| (a) TOTAL Independent Expenditures | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature KENNEY, J M, , ,
[Electronically Filed]
Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 12 OF 13
 FOR LINE 24 OF FORM 3X

| | | | | | |
|--|--|--|--|---|--|
| NAME OF COMMITTEE (In Full) MOVE MARYLAND FORWARD | | | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00622431 </div> | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report | | | | New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/> | |

| | | | | | | | |
|---|--|-------------|------------------------------------|--|--|--|--|
| Full Name of Payee INTEGRAM | | | <input type="checkbox"/> Memo Item | | | Date of Public Distribution/Dissemination | |
| Mailing Address 22695 COMMERCE CENTER CT | | | | | | <input type="text"/> / <input type="text"/> / <input type="text"/> | |
| City STERLING | | State VA | | Zip Code 20166 | | <input type="text"/> / <input type="text"/> / <input type="text"/> | |
| Purpose of Expenditure VOTER CONTACT MAIL | | | | Category/Type 004 | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">915.37</div> | |
| Name of Federal Candidate: SZELIGA, KATHY, , , | | | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | |
| Calendar Year-To-Date Per Election for Office Sought | | | | <div style="border: 1px solid black; padding: 2px; display: inline-block;">224729.37</div> | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ | |

| | | | | | | | |
|--|--|-------------|------------------------------------|--|--|--|--|
| Full Name of Payee WERQ-FM | | | <input type="checkbox"/> Memo Item | | | Date of Public Distribution/Dissemination | |
| Mailing Address 1705 WHITEHEAD RD | | | | | | <input type="text"/> / <input type="text"/> / <input type="text"/> | |
| City GWYNN OAK | | State MD | | Zip Code 21207 | | <input type="text"/> / <input type="text"/> / <input type="text"/> | |
| Purpose of Expenditure RADIO ADS (10/31 - 11/05/2016) | | | | Category/Type 004 | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">12724.50</div> | |
| Name of Federal Candidate: SZELIGA, KATHY, , , | | | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | |
| Calendar Year-To-Date Per Election for Office Sought | | | | <div style="border: 1px solid black; padding: 2px; display: inline-block;">237453.87</div> | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ | |

| | | |
|---|--|--|
| (a) SUBTOTAL of Itemized Independent Expenditures | | <div style="border: 1px solid black; padding: 2px; display: inline-block;">13639.87</div> |
| (a) SUBTOTAL of Unitemized Independent Expenditures | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> |
| (a) TOTAL Independent Expenditures | | <div style="border: 1px solid black; padding: 2px; display: inline-block;">192921.87</div> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KENNEY, J M, , ,

Signature

[Electronically Filed]

Date / /

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SE

Transaction ID : SE.4214

THE COMMITTEE ORIGINALLY FILED A FORM 24 INDICATING THAT STRATEGIC CAMPAIGN GROUP WOULD PRODUCE A VOTER CONTACT MAILING FOR AN ESTIMATED COST OF \$1,800. HOWEVER, THE MAILING WAS INSTEAD PRODUCED BY INTEGRAM AT A REDUCED COST (\$915.37).

Form/Schedule:

Transaction ID: